MASSACHUSETTS UNIFORM APPLICATION FOR PERMIT TO DO GASFITTING

2	(Print or Type)										, Mass. Date							•	19 Pe			ermit #						
P	Building Location, Made: But																											
												1	_ Type of Occupancy															
	New	New Renovation								□ Replacement □ FIXTURES								Pl	Plans Submitted					: Yes □ No □				
G			00	R RANGES	OVENS	8	IG BOILERS	CES	EATERS	HEATERS	S	ENERATORS	OCKS.	CONV. BURNERS	TOP UNITS	ROOM HTRS	T VENT HTRS	HEATERS		-								
			RANGE	HE A TE	OVENS	GRILLE	HEATIN	FURNA	UNITH	WATEF	DRYERS	GASG	LAB. C	CONV.	ROOF	VENT.	DIREC'	POOL	TESTS	OTHER								
	BAS	-BSMT. EMENT FLOOR																									-	
	2ND 3RD	FLOOR FLOOR																										
	5TH	FLOOR FLOOR																									-	
		FLOOR FLOOR																									\dashv	
Installing (•		ı C	orp	ora ners	ne atio ship	n			•		Cer	tific	cate
Business Name of L																	ıF	irm	/Co	•								
INSU I have a c Ye	RANC urrent l	E COVE liability po	ERA	уо	r its					•																Eh.	14	2.
If you hav A liability i		•	•		e ir	ndic	cate	e th	-	•			_	e by nde				•	ne a	app	-		te b 🗖					
OWNER'S required by waives thi	S INS	SURANC apter 142	E	W	AIV ne f	ER Mas	R: I ss.	an Ge	ı av	var	e th	nat	the	lice	ens	see	do	es	not atu	<u>ha</u> ire	ve	the	ins	sura	ance nit	e cc app	ve lica	rage ation
Signature of	of Owne	er or Own	er's	s Ag	gent													(Ow	ne			k o		nt [
I hereby ce the best of be in compl	my knov	vledge and	l tha	at al	l plu	mbi	ing v	work	an	d in	stall	atio	ns p	erfo	rme	ed u	ınde	r th	е ре	ermit	t iss	ued	l for	this	app	olicat	tion	will
By Title							-	Typ	Plur	nbe	er	se:	_		_	_					_							
City/Tow	City/Town					-	□ Gasfitter□ Master□ Journeyman						Signature of Licensed Plumber License Number															

BELOW FOR OFFICE USE ONLY

FINAL INSPECTIONS	SKETCHES	FEE	PROGRESS INSPECTIONS
		NO	
		APPLICATION FOR PERMIT TO DO GASFITTING	
		NAME & TYPE OF BUILDING	
		LOCATION & TYPE OF BUILDING	
		PLUMBER OR GASFITTER	
		LIC. NO.	
		PERMIT GRANTED	
		DATE 19	
		GAS INSPECTOR	